

| POSITION            | INITIALS | ID NO. | DATE    |
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| FEE DETERMINATION   | H.O.     | 69350  | 1-22-99 |
| O.I.P.E. CLASSIFIER |          |        |         |
| FORMALITY REVIEW    |          | 69853  | 2/1/99  |

### INDEX OF CLAIMS

✓ Rejected  
 = Allowed  
 - (Through numeral) Canceled  
 - Restricted  
 N Non-elected  
 I Interference  
 A Appeal  
 O Objected

| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions,  
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